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OFFICIAL**FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8****TO: Examiner Christopher C. Pratt - United States Patent and Trademark Office**

Fax No. 703-872-9306

Phone No. 703-306-2892

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on May 12, 2004, to the above-identified facsimile number.

Marcia A. Mueller (Signature)**FROM: Marcia A. Mueller (Typed or printed name of person signing Certificate)**

Fax No. 513-626-3004

Phone No. 513-626-0885

Listed below are the item(s) being submitted with this Certificate of Transmission:**

Number of Pages Including this Page: 7

- 1) Request for RCE Transmittal (1 page)
- 2) Transmittal Amendment (1 page)
- 3) Request for Continued Examination Amendment (4 pages)
- 4)
- 5)

Inventor(s): Jonathan P. Brennen et al.

S.N.: 09/824,454

Filed: April 2, 2001

Case: 8047

Comments:

**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

**IN THE UNITED STATES PATENT & TRADEMARK OFFICE
RESPONSE/AMENDMENT**

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:


Application No. : 09/824,454
Applicant(s) : Jonathan P. Brennan
Filed : April 2, 2001
Title : Soft, Thick, Non-Linting Nonwovens
TC/A.U. : 1771
Examiner : Christopher C. Pratt
Conf. No. : 9506
Docket No. : 8047
Customer No. : 27752

1. ☒ No additional fees (claims fees or extension fees) are known to be required.
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 6	MINUS	** 20	= 0	x \$18 =	\$0.00
INDEP.	* 1	MINUS	*** 3	= 0	x \$86 =	\$0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						
					+ \$290 =	\$0.00
					TOTAL	\$0.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
 *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. ☐ The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$ for a -month extension of time.
4. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
 - a. ☒ Any patent application processing fees under 37 CFR §1.16.
 - b. ☒ Any patent application processing fees under 37 CFR §1.17.
5. The Director is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.


Eric T. Addington
Attorney for Applicant
Registration No. 52,403
Tel. No. (513) 626-1602

Date: May 12, 2004
Customer No. 27752